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TO: Examiner: Dinh, Duc O.

Art Unit: 2674

Fax Number: (703) 872-9314

FROM: Kevin J. Simons

Reg. Number: 45,110

Fax Number: (408) 474-9075

RE: Serial No.: 09/919,661

Docket No.: US 018114

6 Pages (including cover sheet)

This transmission includes: Response to Office Action
Transmittal

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I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office
Fax No. (703) 872-9314

On: May 27, 2003.


Kevin J. Simons

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Attorney Docket No.:

Adler

US018114

Appl. No.: 09/919,661 Conf. No.: 4666

Art Unit: 2674

Filed: 07/31/2001

Examiner: Dinh, Duc Q

Title: DISPLAY MONITOR HAS STAND-ALONE MODE AND PC PERIPHERAL MODE

Assistant Commissioner for Patents
Washington, D.C. 20231**TRANSMITTAL BY FAX**

Sir:

A total of 5 pages are in this submission, which include this transmittal and the following:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Combined Declaration and Power of Attorney |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Drawing(s) - sheet(s) |
| <input type="checkbox"/> Fees attached in the amount of \$ _____ | <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Copy(ies) of cited references | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Ap. | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Copy of USPTO Notice | |
| <input type="checkbox"/> Assignment Papers (for an Application) | |

The Commissioner is hereby requested and authorized pursuant to 37 CFR §1.136(a)(3), to treat any concurrent or future reply in this application requiring a petition for extension of time for its timely submission, as incorporating a petition for extension of time for the appropriate length of time. Please charge any additional fees which may now or in the future be required in this application, including extension of time fees, but excluding the issue fee unless explicitly requested to do so, and credit any overpayment, to Deposit Account No. 14-1270.

Respectfully submitted,

By Kevin Simons
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Phone: (408) 474-9075; FAX: (408) 474-9082**CERTIFICATE OF TRANSMISSION**

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on May 27, 2003.

By

Kevin Simons
Kevin J. Simons